



17W 2611

# FEE TRANSMITTAL for FY 2006

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

(\$)

## Complete if Known

Application Number	09/813,656
Filing Date	March 20, 2001
First Named Inventor	Robert W. Heath
Examiner Name	Curtis B. Odom
Art Unit	2611
Attorney Docket No.	42390P15413

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☐ Credit any overpayments

## FEE CALCULATION

### Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) \_\_\_\_\_

SUBTOTAL (2) (\$)

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Jared S. Engstrom	Registration No. (Attorney/Agent)	58,330	Telephone	(503) 439-8778
Signature				Date	05/24/07



## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application No.	09/813,656
Filing Date	March 20, 2001
First Named Inventor	Robert W. Heath
Art Unit	2611
Examiner Name	Curtis B. Odom
Attorney Docket Number	42390P15413
Total Number of Pages in This Submission	

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div>-Return postcard</div>
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

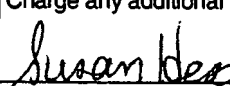
Firm or Individual name	Jared S. Engstrom, Reg. No. 58,330 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 24, 2007

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Katherine Jennings		
Signature		Date	May 24, 2007



<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 2001.662USD2	
Application No. 10/693,802	Filing Date October 23, 2003	Examiner Jon D. Epperson	Art Unit 1639		
Applicant(s): Ivo Franci Eggen et al.					
Invention: PROCESS FOR RAPID SOLUTION SYNTHESIS OF PEPTIDES					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	35	- 27 =	8	x 25.00	200.00
<b>Independent Claims</b>	1	- 3 =	0	x 100.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
<b>Other fee (please specify):</b> One month extension of time (37 CFR 1.17(a)(1)) Supplemental IDS (37 CFR 1.17(p))					120.00
					180.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					500.00
<input type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>01-1350</u> in the amount of \$ <u>500.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>01-1350</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 _____ Susan Hess Attorney/Agent Reg. No.: 37,350				Dated: <u>May 25, 2007</u>	



Application No.: 10/693,802

Attorney Docket No.: 2001.662USD2

## Certificate of Mailing Under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on May 25, 2007  
Date

Signature

**Christina Constantino**

Typed or printed name of person signing Certificate

Registration Number, if applicable

**914-333-7476**

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment Transmittal Letter in duplicate (2 pp)  
Petition for 1 month extension of time (1 p)  
Amendment After Non-Final Office Action with Annex I (13 pp)  
Supplemental IDS (4 pp)  
PTO SB/08 (1 p) with 1 reference cited  
Return Receipt Postcard